

REPORT OF ELECTIONEERING COMMUNICATION

For use by a person who has expended \$100 or more per year on electioneering communications. Any person incurring costs of \$1,000 or more must file within 48 hours of incurring costs.

Name of person/entity			
Address (Physical)	City	_State	Zip
Mailing Address	City	_State	Zip
Telephone			
Type of Report:			
☐ 7-day Pre-Primary	30-day Post-Primary		48-hour Repor
7-day Pre-General	30-day Post General		
Is this an amended report? No This amends a previous report filed			
Date of Public Distribution(s)			
Total Expenditures this Statement		\$	
Total Itemized Contributions of \$50 or More this statement		\$	
Total Contributions this statement			\$
	n this manaut is a turn a commista	e and correc	t Campaign Financ
I hereby certify that the information i	in this report is a true, complete		1 0
I hereby certify that the information in Disclosure Report as required by law			1 0
	<i>'</i> .		

Submit Report to:

Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 208-334-2852 fax: 208-334-2282

Itemized Contribution for Electioneering Communications (\$50 or more)

Name of person/entity____

P	PLEASE PRINT/TYPE			
1. 2.	Date Received//_ Contribution Amount \$	4. Name (last, first)5. Address6. City/State/Zip		
3.	Cash Loan In-Kind	o. City/State/Zip		
	Date Received/_/_ Contribution Amount \$ Cash	4. Name (last, first)5. Address6. City/State/Zip		
	Date Received//_ Contribution Amount \$ Cash	4. Name (last, first)5. Address6. City/State/Zip		
	Date Received//_ Contribution Amount \$ Cash	4. Name (last, first)5. Address6. City/State/Zip		
1. 2. 3.	Date Received/_/_ Contribution Amount \$ Cash	4. Name (last, first)5. Address6. City/State/Zip		

Itemized Expenditures for Electioneering Communications

Name of person/entity			
1. Date Expended	3. Name (last, first)		
//	4. Address		
	5. City/State/Zip		
2. Amount	6. Method of Communication(s)		
	7. Name of Candidate(s) referred to		
\$			
cash	8. Support Oppose		
in-kind	9. Purpose of Expenditure		
1. Date Expended	3. Name (last, first)		
//	4. Address		
	5. City/State/Zip		
2. Amount	6. Method of Communication(s)		
	7. Name of Candidate(s) referred to		
\$			
cash	8. Support Oppose		
in-kind	9. Purpose of Expenditure		
Date Expended	3. Name (last, first)		
//	4. Address		
	5. City/State/Zip		
2. Amount	6. Method of Communication(s)		
	7. Name of Candidate(s) referred to		
\$			
cash	8. Support Oppose		
in-kind	9. Purpose of Expenditure		
1 Data Evmanda d	3. Name (last, first)		
1. Date Expended	4. Address		
//	5. City/State/Zip		
2. Amount	6. Method of Communication(s)		
2. Amount	7. Name of Candidate(s) referred to		
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cash	8. Support Oppose		
in-kind	9. Purpose of Expenditure		